
A Message from the Editor-in-Chief

Paul E. Levin, M.D.

Welcome to the inaugural edition of the *Montefiore Journal of Musculoskeletal Medicine and Surgery*. Health care economics, medical education, the Internet, and a greater focus on bioethics and patient centered care have all contributed to an exponentially evolving health care delivery system in the United States. Although many wish for the status quo, we believe that the changes will ultimately lead to both improved patient care and improved graduate and post-graduate medical education with a focus on the primacy of the patient. Care of musculoskeletal conditions accounts for nearly one third of all health care expenses in the United States with an estimate of direct musculoskeletal health care costs of 213 billion dollars.* Identifying the optimal treatment for musculoskeletal conditions will be an imperative for successful delivery of care, and it is crucial that all providers of musculoskeletal care participate in both clinical and basic science investigations to contribute to this foundation. In addition, medical education needs to evolve with an acknowledgment that the classic model of apprenticeship is no longer viable and investigations into improved training models are necessary to meet the new challenges in how we educate the future generation of health care providers.

The *Montefiore Journal of Musculoskeletal Medicine and Surgery* has been introduced to meet these challenges. We hope to be a valuable venue for individuals to report innovative ideas in basic science and translational and clinical research. In addition, we will be seeking manuscripts that

report on innovative strategies in health care delivery, health care economics, and both graduate and post-graduate medical education. Our inaugural issue has met his challenge. I. Martin Levy, M.D., has been devoted to medical education for his entire professional career and reports on a successful strategy to both improve skills training for orthopaedic residents and meet a bioethical imperative to improve trainee's technical skills before assisting in the operating room. Wanda Horn, M.D., and colleagues report on an initial experience with a comanagement model in caring for geriatric patients with hip fractures. The comanagement model has demonstrated both improved outcomes and cost savings with decreasing length of stay. The remaining articles all introduce clinically relevant guidance in the care of challenging musculoskeletal conditions. We anticipate future successes in positioning our journal to be at the forefront of innovation in health care delivery. We welcome submissions from all disciplines involved in the delivery and education of musculoskeletal science, medicine, and surgery including investigations in medical education, health care economics and delivery, basic science, and translational and clinical research.

Thank you for reading and exploring our inaugural edition.

*United States Bone and Joint Initiative. The Burden of Musculoskeletal Diseases in the United States (3rd ed). Rosemont, IL, 2014. Available at www.boneandjointburden.org. Accessed on January 2, 2016.